

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>JD</i>	75231	
O.I.P.E. CLASSIFIER		48	10/22/99
FORMALITY REVIEW		71768	11-1-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	10/23/99
2	10/23/99
3	10/23/99
4	10/23/99
5	10/23/99
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47	10/23/99
48	10/23/99
49	10/23/99
50	10/23/99

Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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